



Attorney Docket No.: PMP-05-1542

In re Application of James P. Mulhern et al.

Serial No.: 10/613,663

Filed: July 2, 2003

For: REAR WHEEL DRIVE POWER WHEELCHAIR

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small entity status of this application under 37 CFR §1.9 and §1.27 has been established.
- ☐ A verified statement to establish small entity status under 37 CFR §1.9 and §1.27 is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

(Col. 1) (Col. 2) (Col. 3)

SMALL ENTITY

OTHER THAN
SMALL ENTITY

	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PRE- VIOUSLY PAID FOR	PRESENT EXTRA
TOTAL	19	-	** 20=	0
INDEP.	*3	-	** 3=	0
Application Size Fee				
First Presentation of Multiple Dependent Claim				

RATE	ADD'L FEE
x 25 =	\$
X 100 =	\$
	\$
+180=	\$

OR

RATE	ADD'L FEE
x50 =	\$
x 200 =	\$
x250=	\$
+360=	\$

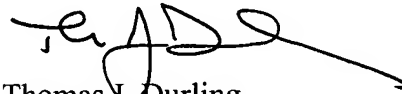
TOTAL ADDITIONAL FEE \$ _____ OR \$0.00

- * If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.
- ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.
- *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ Please charge my Deposit Account No. 50-2719 in the amount of \$_____.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$_____ is attached.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-2719. A duplicate copy of this sheet is enclosed.
- ☒ Any filing fees under 37 CFR §1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 CFR §1.17 with the exception of the Issue Fee which we intend to pay by check.

Respectfully submitted,



Thomas J. Durling
Reg. No. 31,349
Attorney for Applicants

TJD:rb
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HIFW

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit : 3611
Examiner : Faye M. Fleming
Serial No. : 10/613,663
Filed : July 2, 2003
Inventors : James P. Mulhern et al
Title : REAR WHEEL DRIVE POWER
WHEELCHAIR

CUSTOMER NO. 35811

Docket No.: PMP-05-1542

Confirmation No.: 7202

Dated: January 23, 2006

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Certificate of Mailing Under 37 CFR 1.8

For

Postcard

Check for \$300.00 (\$120 – Claim of Extension; \$180 – IDS)

Claim of Extension of Time, in duplicate

Amendment Transmittal Letter, in duplicate

Response to First Office Action

Supplemental Information Disclosure Statement

Form PTO-1449 w/copies of three (3) non-US publications

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date appearing below.

Name of Applicant, Assignee, Applicant's Attorney
or Registered Representative:

DLA Piper Rudnick Gray Cary US LLP
Customer No. 35811

By: *[Signature]*

Date: *January 23, 2006*